

## CHECK-LIST

**A.** **Have you:** (Tick box(es) applicable)

1. Read and understood Annexure B to this form?
2. Applied for and received confirmation of  
SAPS Risk Assessment for the event?
3. Compiled a Safety Plan for event?
4. Liaised with Traffic Department regarding  
traffic control (if necessary)?
5. Applied for Certificate of Acceptability (for  
food stalls / catering)?
6. Applied for a Liquor License (where applicable)?
7. Informed the Ward Councillor in whose Ward the  
Event will take place?

**B.** Please ensure that you have completed and attached the following documents **before** submitting your application:

1. Application: Annexure A
2. Addendum to Annexure A (if applicable)
3. Indemnity Form
4. SAPS Risk Categorization \*
4. Safety Plan
5. Route Map (if applicable)

\* **SAPS RISK CATEGORIZATION** – forms to be completed and sent to the address / e-mail address / fax number stated on the form – **NOT TO THE KOUGA MUNICIPALITY.** SEE ANNEXURE C.

Kouga LED & Tourism Department  
16 Woltemade Street  
P O Box 21  
Jeffreys Bay  
6330

Tel: 042 2002200

Email: [xwagosa@kouga.gov.za](mailto:xwagosa@kouga.gov.za)  
[vyake@kouga.gov.za](mailto:vyake@kouga.gov.za)  
[vblouw@kouga.gov.za](mailto:vblouw@kouga.gov.za)

**APPLICATION FOR AN EVENT IN KOUGA AREA**

NAME OF EVENT: \_\_\_\_\_

LOCATION OF EVENT: \_\_\_\_\_

DATE/S OF PROPOSED EVENT: \_\_\_\_\_

START TIME OF EVENT (FOR EACH DAY): \_\_\_\_\_ DURATION: \_\_\_\_\_

NUMBER OF ATTENDEES EXPECTED: \_\_\_\_\_

(NB: Specify estimates for each day)

EVENT ORGANISER / PERSON MAKING APPLICATION \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

DESIGNATION: \_\_\_\_\_

TEL/CELL: \_\_\_\_\_

FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

BRIEF DESCRIPTION OF EVENT:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**1. TRAFFIC CONTROL REQUIRED? : YES/ NO**

If **Yes** Please Provide Details: \_\_\_\_\_

• SECTION OF ROAD(S): \_\_\_\_\_

• TIME: \_\_\_\_\_

**2. MARQUEES / TENTS: YES/ NO \_\_\_\_\_**

If **Yes** Please Provide Details:

\_\_\_\_\_

**3. MUSIC/PUBLIC ADDRESS/ PA SYSTEM, ETC. TO BE USED: YES/ NO**

If **Yes** Please Provide Details: \_\_\_\_\_

- **MUSIC / OTHER (PLEASE GIVE DETAILS):**

\_\_\_\_\_

**4. CATERING / FOOD STALLS:**

- **NUMBER PLANNED:** \_\_\_\_\_

- **NUMBER WITH CERTIFICATES OF ACCEPTIBILITY:** \_\_\_\_\_

**5. OTHER SERVICES**

- **ELECTRICITY YES / NO** \_\_\_\_\_

**DETAILS:** \_\_\_\_\_

- **WATER YES / NO** \_\_\_\_\_

**DETAILS:** \_\_\_\_\_

- **WASTE REMOVAL YES / NO** \_\_\_\_\_

**DETAILS:** \_\_\_\_\_

**ANY OTHER SPECIAL REQUIREMENTS:**

\_\_\_\_\_

\_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **APPLICATION DATE:** \_\_\_\_\_

**PLEASE NOTE:** This application does not mean the Kouga has approved your planned event. Please ensure you liaise with the Tourism and Creative Industries regarding the approval process and any additional information required. Your Event can only proceed once the Kouga formally gives approval and a permit is issued.

**To be completed if event includes a parade/ procession/ closing of roads/  
making use of public roads in any way**

**Date:** \_\_\_\_\_

**Assembly Point:** \_\_\_\_\_

**Starting Location / Road(s):** \_\_\_\_\_

**Starting Time:** \_\_\_\_\_

**End Location / Road(s):** \_\_\_\_\_

**End Time:** \_\_\_\_\_

**ROUTE:**

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**LED, TOURISM AND CREATIVE INDUSTRIES DEPARTMENT**  
**KOUGA MUNICIPALITY**

**INDEMNITY FORM**

I, *(full name)* .....  
*(Print)*  
ID No. ....

**In my capacity as** ..... **of**  
..... *(Full name of institution)* **being duly authorized**

**hereto on behalf of institution with regard to**

.....  
..... *(state purpose / event)*

With full knowledge of such declaration, declare as follows:

I hereby indemnify the Kouga Municipality against and hold it harmless from or any loss or damage, or all actions, proceedings or claims arising from the permission granted for the holding of the abovementioned event and/or arising from the negligence or gross negligence or any other cause whatsoever in connection herewith.

Signed on this ..... day of ..... 20...., at  
.....

**SIGNATURE** .....

**DATE** .....

## KOUGA MUNICIPALITY OPERATIONAL REQUIREMENTS

- A.** The Kouga Municipality has requirements for applications, timeframes as well as the Events Plan which must be submitted.

The Kouga Municipal LED, Tourism and Creative Industries Department must be contacted to submit an application and confirm the application details and requirements, Tel: 042 2002 2200  
Email: [xwagosa@kouga.gov.za](mailto:xwagosa@kouga.gov.za) or [yyake@kouga.gov.za](mailto:yyake@kouga.gov.za) or [yblouw@kouga.gov.za](mailto:yblouw@kouga.gov.za)

**B. Application Time Frames:**

- A formal application to stage an event must be made to the Kouga Municipality as per application form in **Annexure A**.
- Applications to stage an event will **only** be considered if sufficient information is submitted.
- The application should be made to the Kouga Municipal LED, Tourism and Creative Industries Department and include the name and contact numbers of the organizer, the event Venue Owner and the Manager and provide as much information as possible about the planned event.
- A KM zoning extract/certificate for the planned event venue or location must be obtained by an applicant or via the KM Town Planning Department prior to the submission of the detailed events application (Refer **Annexure A**).
- For applications for sporting events, the respective sports governing body endorsement (Kouga Sports Council) must be obtained and submitted to the Kouga Municipality before an application maybe considered.

\* **South African Police Services Risk Assessment Application:** (Refer **Annexure C**)

**Note: Section 6 of the Safety at Sports & Recreational Events Act, Act 2 of 2010 applies and will not be deviated from.**

Depending on the size, type, location, date/time, length, event location/s size of venue/s, impact or risk of the event and drawing on any assessment information as required, the following timeframes below will apply:

SIZE	CROWD SIZE / NO. OF PARTICIPANTS	<b><u>MINIMUM</u> TIME BEFORE ADVERTISING or PUBLICISING AN EVENT TO SUBMIT AN APPLICATION TO THE MUNICIPALITY **</b>
Small	50* to 2000	40 working days (2 month) ***
Medium	2001 – 5000	80 working days (4 months)
Large	5001 – 10 000	90 working days (5 months)
Very Large	10 001 – above	8 months
Any Event which involves an application for a Liquor License.		40 working days
Any Event which involves and application for Temporary Land Use Departure		At least 3 months ahead of the planned event date.

- \* Events of fewer than 50 persons where there is no amplified sound or no temporary structures to be used need not submit an application.  
However, the Kouga Municipality may determine whether the impact and risk attached to an event of fewer than 50 persons would require the submission of an application.

\*\* **Note:** This excludes any specific or special application directives which the municipality may issue from time to time, which may vary by event type, risk, size, the time of the year, duration, venue or location (for example over the festive season or public holiday or related to a type of event or specific venue/location) or impact on the transport network or any other Municipal activity.

\*\*\* **Note:** If a small event includes food vendors, a minimum of 40 days will be required if food vendors need to apply for licenses and Certificates of Acceptability.

**C. Event Plan**

- An Event Plan must be submitted by the Event Organizer to the Kouga Municipal LED, Tourism and Creative Industries Department.
- A summary the Kouga Municipal Events application requirements is presented below, which the Event's Organizer must comply with, including but not limited to:
  - a. An Events Application Form must be filled in.  
Description of Event: including type, date, venue, locality and participants.
  - b. Event Programme: full details and times, plus contact details for person responsible for each aspect of event.
  - c. Layout of event: including stages, marquees, catering, Venue Operation Centre etc.
  - d. Land-Use Planning Departure application and approval, where necessary.
  - e. Transport Management Plan (TMP), which may include where applicable, proposed road closures, route plan, parking, optimal public transport utilization, emergency access routes. The format of the TMP will be as prescribed by the municipality.
  - f. Crowd Management Plan.
  - g. Emergency and Contingency Plans: including medical, security, emergency, facility, evacuation.
  - h. Event Communication Plan: including ticket selling strategy, accreditation
  - i. Community Participation Plan: including but not limited to contact with Councillor/s; Community/ Residents/ Organizations/ Associations and Business Associations.
  - j. Environmental Management Plan.
  - k. Integrated Waste Management Plan.
  - l. Vendors / Caterers: list of details and use of Liquid petroleum gas. Kouga Municipal Informal Trading and Municipal Health By-Law requirements and related legislative requirements.
  - m. Health requirements including: Certificates of Acceptability, vendor licenses, ablution facilities and/or mobile toilets.
  - n. Completed Application for: Noise Exemption (incl. public participation); erection of Stages/Marquees. Proof of submission of Liquor License/s, Fireworks application; Civil Aviation Application as appropriate to the event.
  - o. KM Services requirements: including Electricity, Water, Waste Management Plan (during and after the event), transport, roads and storm water.
  - p. Indemnity forms and Public Liability insurance confirmation letter
  - q. Written approval from Venue Owner/Venue Manager to the applicant authorizing the use of the facility/venue to host the event.
  - r. Proof of deposit paid to the KM for the event and/or services as indicated by the KM.

**An Event Plan approved by the Municipality is a binding contract between the Municipality and the Event Organizer and/or event venue, and must be complied with at all times and at all stages of the event.**



## **SAFETY AT SPORTS AND RECREATIONAL EVENTS ACT 2/2010**

### **SECTION 6 (3) APPLICATION**

**The National Commissioner  
SOUTH AFRICAN POLICE SERVICES**

Division: OPERATIONAL RESPONSE SERVICES  
Section Commander: MAJOR EVENTS  
**SOUTH AFRICAN POLICE SERVICE**  
Pretoria

Per e-mail:     [Ecprov.major.events@saps.gov.za](mailto:Ecprov.major.events@saps.gov.za) or [CarelseR@saps.org.za](mailto:CarelseR@saps.org.za)

Tel:     040 608 7404

Dear Sir

### **APPLICATION FOR EVENT RISK CATEGORIZATION I.T.O SECTION 6 (3) OF THE SAFETY AT SPORTS & RECREATIONAL EVENTS ACT, 2010 (ACT NO. 2 OF 2010) – (Name; nature; venue & date of event)**

Please find set out below an application i.t.o. Section 6 (3) of the Safety at Sports & Recreational Events Act (hereinafter referred to as "*the Act*") for risk categorization in respect of the following event:

#### **SECTION 1 - EVENT DETAILS**

- 1.1 Name of Event:
- 1.2 Nature/ Type of Event:
- 1.3 Event Venue/ Stadium/Route:
- 1.4 Local Authority certified safe spectator capacity of the Venue/ Stadium:
- 1.5 Physical Address of Event Venue/ Stadium:
- 1.6 GPS Co-ordinates of Event Venue/ Stadium:
- 1.7 Day & Date of Event:
- 1.8 Scheduled Commencement Time of Event:
- 1.9 Anticipated Duration of Event (spectator access time to closure of venue):
- 1.10 Popularity/ reputation of the event:
- 1.11 Expected spectators / participants attendance:
- 1.12 Any VIP's/ VVIP's/Ministers attending/ participating in the event:



- 1.13 Suitability of the Stadium/Venue/ Route:
- 1.14 Historic record of safety, security and medical incidents at similar events:
- 1.15 Any relevant crime statistics and crime trends:
- 1.16 Any threat analysis information regarding the event:
- 1.17 Any information wrt the sale and consumption of liquor at the event:
- 1.18 Relevance of the outcome of a competitive event:
- 1.19 Level of rivalry between competing sports teams or sports persons participating and /or any tension/ rivalry which may exist between the supporters:
- 1.20 Positions of the teams on the league or rankings of the persons participating:
- 1.21 Any international, national, local social, economic, political, or security related factors which may have an impact on the event from a safety and security perspective:
- 1.22 Availability of police officials, emergency and essential services to assist at the event:
- 1.23 Weather or other natural conditions which are anticipated before or on the day of the event:
- 1.24 The nature of pre-event spectator entertainment and marketing promotions contemplated in Section 4(1):
- 1.25 Any other factor that the National Commissioner must take into consideration:
- 1.26 Nearest SAPS Police Station:

## **SECTION 2 - RESPONSIBLE PERSONS (Section 4(1) of the Act)**

### **2.1 Event Organizer:**

#### **2.1.1 Contact Details:**

- Contact Person:
- E-mail address:
- Mobile No.:
- Telephone No:
- Postal Address:
- Physical Address:

### **2.2 Stadium/Venue Owner:**

#### **2.2.1 Contact Details:**

- Contact Person:
- E-mail address:
- Mobile No.:

- Telephone No:
- Postal Address:
- Physical Address:

**2.3 Controlling Body:**

**2.3.1 Contact Details:**

- Contact Person:
- E-mail address:
- Mobile No:
- Telephone No:
- Postal Address :
- Physical Address :

**SECTION 3 - CONFIRMATIONS**

I/We confirm that:

- 3.1 I/We have/have not previously submitted an annual schedule of events as contemplated in Section 6 (1) of the Act. **(Delete where not applicable);**
- 3.2 I/We have/have not previously received a risk categorization in respect of our submitted annual schedule of events from the National Commissioner of the South African Police Service as contemplated in Section 6 (5) of the Act. **(Delete where not applicable);**
- 3.3 There is/is not a valid and current existing stadium or venue safety and grading certificate in place for the stadium/venue, as contemplated in Section 8 of the Act, which will still be valid on the day of the event. **(Delete where not applicable);**

IF NO CERTIFICATES REFERRED TO IN PARAGRAPH 3.3 ARE IN PLACE - WRITTEN REASONS MUST BE SET OUT BELOW AS TO WHY SUCH CERTIFICATES ARE NOT IN PLACE:

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- 3.4 I/We have just initiated plans for the event;
- 3.5 This application satisfies the short notice requirements of Section 6 (3) of the Act:
- 3.5.1 Furnish written reasons here as to why requirements i.t.o. Section 6(1) of the Act i.e. submission of an annual schedule of events could not be complied with in respect of this event:

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**SECTION 4 - ADDITIONAL FACTORS FOR CONSIDERATION BY THE NATIONAL COMMISSIONER TO DETERMINE THE RISK CATEGORIZATION OF THE EVENT**

We respectfully submit that the following factors should also be considered by the National Commissioner in determining the risk categorization in respect of this event:

- 4.1 I/We have/do not have historical experience in the holding of similar events of a similar size (delete where not applicable);
- 4.2 I/We have appointed/ensured the appointment of an Event Safety Officer to oversee the safety & security planning requirements of Section 4 (9) & 23 of the Act are in place:

**Name of Event Safety Officer:**

**Contact Details:**

- E-mail address:
- Contact No:

- 4.3 There will/will not (Delete where not applicable) be controlled liquor sales to the general public at the venue/ stadium i.t.o. existing protocols with the local SAPS;
- 4.4 SIRA registered and Private Security Industry Regulation Act compliant security providers who have worked at the stadium/ venue previously will provide access control & general in-stadium/ venue security and safety stewarding services on the day;
- 4.5 Both provincial & private sector medical emergency services will be deployed at the event for the safety of event participants and the general public;
- 4.6 There are no material historical medical incident trends at similar events hosted previously at the venue which could have an impact on the safety of spectators at the event;
- 4.7 We have notified, in writing, the nearest police station - (name of nearest SAPS Station) of the details of the event.

**SECTION 5 - EVENT RISK CATEGORIZATION RECOMMENDATION**

We respectfully submit, with reference to all of the information set-out above, that the event should be categorized as **LOW RISK/ MEDIUM RISK/HIGH RISK** (Delete where applicable)

I/We await your event risk categorization of this event.

An event briefing meeting has been scheduled at the event venue at on

..... (date and time)

Kind regards

For and on behalf & duly authorized by .....  
(Full legal name of Event Organizer)